

QUALITY AWARD

\$25

Presented to:		Recipient EIN:
Thank you for:		Recipient Org:
From:	Issuer Org:	Date:
Signature:	ureau Director of Billing Low Org	Billing Low Org:
Ы	ureau Director of Billing Low Org	Submit Award to Finance for Processing
\$ 25	Control Number	Entered into Payroll By: Date:

Utah		
Department		
of Health		

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